

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number 8404.021 First Named Inventor Donald E. Weder COMPLETE IF KNOWN Application Number Not Yet Assigned Filing Date Herewith Group Art Unit 3644 Examiner Name F. Palo	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		OR	

As a below named inventor, I hereby declare that: <p>My residence, mailing address, and citizenship are as stated below next to my name.</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p style="text-align: center;">FLORAL CONTAINER WITH ACCORDION FOLDED UPPER PORTION</p> <p style="text-align: center;">(Title of the Invention)</p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto</p> <p>OR</p> <p>was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International</p> <p>(if applicable).</p> <p>Application Number <input type="text"/> Not Yet Assigned and was amended on (MM/DD/YYYY) <input type="text"/></p> <p>I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.</p> <p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Prior Foreign Application Number(s)</th> <th style="width: 25%;">Country</th> <th style="width: 25%;">Foreign Filing Date (MM/DD/YYYY)</th> <th style="width: 25%;">Priority Not Claimed</th> <th style="width: 25%;">Certified Copy Attached?</th> </tr> <tr> <th>YES</th> <th>NO</th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p><input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:</p> <p>I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Application Number(s)</th> <th style="width: 50%;">Filing Date (MM/DD/YYYY)</th> </tr> </thead> <tbody> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table> <p><input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.</p>					Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	YES	NO				<input type="checkbox"/>	Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="text"/>	<input type="text"/>																			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?																																		
YES	NO																																					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																		
Application Number(s)	Filing Date (MM/DD/YYYY)																																					
<input type="text"/>	<input type="text"/>																																					

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	30589	<input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below
Name DUNLAP, CODDING & ROGERS, P.C.				
Address P. O. Box 16370				
Address				
City	Oklahoma City		State	OK ZIP 73113
Country	US	Telephone (405) 607-8600		Fax (405) 607-8686
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname Weder		
Inventor's Signature		Date		
Residence: City	Highland	State	IL	Country USA Citizenship USA
Mailing Address 111 Sixth Street				
Mailing Address				
City	Highland	State	IL ZIP 62249	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City		State		Country Citizenship
Mailing Address				
Mailing Address				
City	State	ZIP	Country	
Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				